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H.J. BOARD OF DENTISTRY
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DEBORAH T. PORITZ ATTORNEY GENERAL OF NEW JERSEY

By: Kathy Rohr
Deputy Attorney General
Division of Law, 5th Floor
124 Halsey Street
P.O. Box 45029
Newark, New Jersey 07102
Tel: (201) 648-4735

STATE OF NEW JERSEY
DEPARTMENT OF LAW AND PUBLIC
SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF DENTISTRY
DOCKET NO.

IN THE MATTER OF)	
PAUL O'BEDA, D.D.S.)	Administrative Action
LICENSED TO PRACTICE DENTISTRY IN THE STATE OF NEW JERSEY)	CONSENT ORDER
)	

This matter was opened to the New Jersey State Board of Dentistry ("Board") upon receipt of a patient complaint from Stacy Senteneri concerning dental treatment performed by the respondent consisting, in pertinent part, of root canal therapy, a post and core, and a crown on tooth #3 in the period January 1991 through June 1993. The Board reviewed the entire record in this matter consisting of the patient charts, radiographs, and further information acquired at an investigative inquiry attended by the respondent on October 19, 1994. Upon review the Board found inadequate margins on tooth #3 and root perforation where the post was placed resulting in the eventual extraction of tooth #3. It appearing that the respondent desires to resolve this matter without recourse to formal proceedings and for good cause shown;

IT IS ON THIS 22 DAY OF NOVEMBER, 1994, HEREBY ORDERED AND AGREED THAT:

- 1. Respondent shall make restitution to the patient by submitting a certified check or money order made payable to Stacy Senteneri in the amount of \$476.00 to the State Board of Dentistry at 124 Halsey Street, Sixth Floor, Newark, New Jersey 07102, no later than the first day of the month following the entry date of this Order.
- 2. Respondent shall successfully complete 42 hours of continuing education to include 14 hours in root canal therapy, 14 hours in post and core dentistry, and 14 hours in crown and bridge dentistry. These courses shall be approved by the Board in writing prior to attendance utilizing the attached Pre-Approval Sheet, and the courses must be completed no later than June 30, 1995. Respondent also shall be required to complete the attached Continuing Education Report and Proof of Attendance as proof of successful completion of the required course work. The attached forms are made a part of the within Order, and a separate form is to be used for each course. Said continuing education ordered herein shall be in addition to, and not a part of, the mandatory continuing education currently required for biennial registration renewal.

Stephen Candio, D.D.S.

President

State Board of Dentistry

I have read and understand the foregoing Order and agree to be bound by its terms. Consent is hereby given to the Board to enter this Order.

Paul O'Beda, D.D.S.

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State of New Jersey

ROBERT J DEL TUFO

LOCATION

124 HALSEY STREET 6TH FLOOR NEWARK NJ 02102 (201) 648 7087 DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
BOARD OF CENTISTRY
CONTINUING EDUCATION COURSE
PRE-APPROVAL SHEET

EMMA N BYRNE DIRECTOR

WAIGING ADDRESS

PO BOT 45005

ATTACH COURSE DESCRIPTION AND/OR BROCHURE AND SUBMIT AT LEAST 30 DAYS PRIOR TO COURSE DATE. THE BOARD CANNOT ASSURE APPROVAL FOR COURSES PROVIDED ON SHORT NOTICE. A SEPARATE FORM IS TO BE USED FOR EACH COURSE. A COPY WILL BE RETURNED TO YOU AFTER APPROVAL OR DENIAL BY THE BOARD. ******

DENTIST	NAME	***************************************							
ADDRESS									
TELEPHON	E #								
NAME OF	COURSE								
TELEPHON									
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DATE	,				AGN	ES	M. CLAR	KE	
	EXECUTIVE DIRECTOR								